

DOCKET NO. SC12914TP

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number: SC12914TP
In re Application of	Olubunmi O. Adetulu	Filed October 23, 2003
Application Number	10/691,984	
For	SEMICONDUCTOR DEVICE AND METHOD OF FORMING THE SAME	
Group Art Unit	2823	Examiner Fernando L. Toledo
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above-identified application.		
The requested extension and appropriate non-small-entity fee are as follows: (Check time period desired):		
<input type="checkbox"/>	One Month (37 CFR 1.17(a)(1))	\$ 120.00
<input checked="" type="checkbox"/>	Two Months (37 CFR 1.17(a)(2))	\$ 450.00
<input type="checkbox"/>	Three Months (37 CFR 1.17(a)(3))	\$ 1020.00
<input type="checkbox"/>	Four Months (37 CFR 1.17(a)(4))	\$ 1590.00
<input type="checkbox"/>	Five Months (37 CFR 1.17(a)(5))	\$ 2160.00
<input type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27. Therefore, the amount shown above is reduced by one-half, and the resulting fee is \$	
<input type="checkbox"/>	A check in the amount of the fee is enclosed.	
<input type="checkbox"/>	Payment by credit card. Form PTO-2038 is attached.	
<input checked="" type="checkbox"/>	The Commissioner has already been authorized to charge fees in this application to a Deposit Account.	
<input checked="" type="checkbox"/>	The Commissioner is hereby authorized to charge any fees which may be required or credit any overpayment to Deposit Account Number 503079	
<input checked="" type="checkbox"/>	I have enclosed a duplicate copy of this sheet.	
I am the:		
<input type="checkbox"/>	Applicant/inventor	
<input type="checkbox"/>	Assignee of record of the entire interest. See 37 CFR 3.71.	
<input checked="" type="checkbox"/>	Attorney or agent of record (Registration No.: 34,291)	
<input type="checkbox"/>	Attorney or agent under 37 CFR 1.34(a) Registration number if acting under 37 CFR 1.34(a)	
<u>1/25/05</u> Date		
<u>Michael J. Balconi-Lamica</u> Signature		
Michael J. Balconi-Lamica Type or printed name		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input checked="" type="checkbox"/>	Total of 1 form(s) are submitted	
CERTIFICATE OF MAILING		
I hereby certify that this correspondence is being facsimile transmitted or deposited with the United States Postal Service with sufficient postage as first-class mail in an envelope addressed to: Commissioner for Patents, Alexandria, VA 22313 on this date: <u>1/25/05</u>		
Typed or printed name	Elaine Cox	
Signature	<u>Elaine Cox</u>	

DOCKET NO. SC12914TP

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number: SC12914TP															
In re Application of	Olubunmi O. Adelutu																
Application Number	10/691,984																
For	SEMICONDUCTOR DEVICE AND METHOD OF FORMING THE SAME																
Group Art Unit	2823	Examiner Fernando L. Toledo															
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above-identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows: (Check time period desired):</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 10%;"><input type="checkbox"/></td> <td style="width: 70%;">One Month (37 CFR 1.17(a)(1))</td> <td style="width: 20%; text-align: right;">\$ 120.00</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Two Months (37 CFR 1.17(a)(2))</td> <td style="text-align: right;">\$ 450.00</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Three Months (37 CFR 1.17(a)(3))</td> <td style="text-align: right;">\$ 1020.00</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Four Months (37 CFR 1.17(a)(4))</td> <td style="text-align: right;">\$ 1590.00</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Five Months (37 CFR 1.17(a)(5))</td> <td style="text-align: right;">\$ 2160.00</td> </tr> </table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the amount shown above is reduced by one-half, and the resulting fee is \$ _____</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required or credit any overpayment to Deposit Account Number <u>503079</u></p> <p><input checked="" type="checkbox"/> I have enclosed a duplicate copy of this sheet.</p> <p>I am the:</p> <p><input type="checkbox"/> Applicant/inventor</p> <p><input type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71.</p> <p><input checked="" type="checkbox"/> Attorney or agent of record (Registration No.: <u>34,291</u>)</p> <p><input type="checkbox"/> Attorney or agent under 37 CFR 1.34(a) Registration number if acting under 37 CFR 1.34(a) _____</p> <p style="margin-left: 100px;"><u>1/25/05</u> Date</p> <p style="margin-left: 400px;"><u>Michael J. Balconi-Lemica</u> Signature Michael J. Balconi-Lemica Type or printed name</p>			<input type="checkbox"/>	One Month (37 CFR 1.17(a)(1))	\$ 120.00	<input checked="" type="checkbox"/>	Two Months (37 CFR 1.17(a)(2))	\$ 450.00	<input type="checkbox"/>	Three Months (37 CFR 1.17(a)(3))	\$ 1020.00	<input type="checkbox"/>	Four Months (37 CFR 1.17(a)(4))	\$ 1590.00	<input type="checkbox"/>	Five Months (37 CFR 1.17(a)(5))	\$ 2160.00
<input type="checkbox"/>	One Month (37 CFR 1.17(a)(1))	\$ 120.00															
<input checked="" type="checkbox"/>	Two Months (37 CFR 1.17(a)(2))	\$ 450.00															
<input type="checkbox"/>	Three Months (37 CFR 1.17(a)(3))	\$ 1020.00															
<input type="checkbox"/>	Four Months (37 CFR 1.17(a)(4))	\$ 1590.00															
<input type="checkbox"/>	Five Months (37 CFR 1.17(a)(5))	\$ 2160.00															
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input checked="" type="checkbox"/> Total of <u>1</u> form(s) are submitted</p>																	
CERTIFICATE OF MAILING																	
<p>I hereby certify that this correspondence is being facsimile transmitted or deposited with the United States Postal Service with sufficient postage as first-class mail in an envelope addressed to: Commissioner for Patents, Alexandria, VA 22313 on this date: <u>1/25/05</u></p>																	
Typed or printed name	Elaine Cox																
Signature	<u>Elaine Cox</u>																